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Name: _____

Social Security #: ____/____/____

Section 4 - Fees

Check payment(s) enclosed:

G \$150.00 Administrative fee for all levels (EMT, EMT-I, EMT-Paramedic or LP)

G \$15.00 Texas EMS Magazine - Learn about Texas EMS(special price for new subscribers: \$15 for two years)

Section 5 - EMS Employer Information

Are you associated with a Texas licensed EMS Provider or registered First Responder Organization? G yes or G no If yes, list all Texas licensed EMS firms and/or registered First Responder Organizations for which you work/volunteer:

Name of Firm

Address

City, State, Zip

Volunteer/Paid

Section 6 - Felony/Misdemeanor Information

Failure to report convictions and/or provide accurate information may result in disciplinary action against your Texas EMS personnel certification/licensure. We intend to take disciplinary action when criminal history information is omitted, either willfully or inadvertently. If you are currently under supervision (probation) for a criminal offense for which you believe you have not been convicted, please disclose this information below.

Have you ever been convicted of a felony or misdemeanor? G No or G Yes If yes, complete below.

Provide the following information for all felony and/or misdemeanor offenses, excluding minor traffic violations, e.g. speeding, parking (NOTE: DWI/DUI must be reported). Include any conviction(s) currently on appeal. For multiple offenses, use additional sheet(s). Attach additional information/documentation, e.g. court judgement(s), condition(s) of probation, if appropriate.

Indicate offense(s) committed & court case/cause number(s): _____

Date(s) of conviction(s): _____ Sentence(s): _____ Fine(s): \$ _____

City, county, state and country where offense(s) committed: _____

List other names you have used (e.g. alias, married/maiden, etc.) _____

Are you/were you on probation/parole? G No or G Yes Projected discharge date: _____ Discharge date: _____

Has your criminal history been evaluated by another state, country or entity? G No or G Yes

If yes, where (city/state/country)? _____

When: _____

Entity/Agency name: _____

Has your criminal history been previously evaluated by the Texas Department of Health? G No or G Yes

If yes, have you committed any criminal offenses or has the court taken any actions against you since the evaluation?

G No or G Yes

Section 7 - Signature & Date

I hereby affirm and declare that all the information submitted on this form is true and correct. I understand that false statements and/or information on this application may be considered sufficient cause for denial of certification /licensure or decertification/revocation.

Signature of Applicant: _____

Date: _____



Texas Department of Health

William R. Archer III, M.D.
Commissioner of Health

<http://www.tdh.state.tx.us>

Patti J. Patterson, M.D., M.P.H.
Executive Deputy Commissioner

1100 West 49th Street
Austin, Texas 78756-3199
512/458-7111

OUT-OF-COUNTRY RECIPROCITY INFORMATION

Thank you for your recent request for information on gaining Texas certification or licensure when your training was acquired outside the United States. Based on the enclosed photocopy of Texas Emergency Medical Services Rule (EMS) §157.46(j), Certification by Reciprocity for EMS Personnel or Texas EMS Rule §157.40, Paramedic Licensure, you are required to submit the following:

- Texas EMS Personnel Out-of-Country Reciprocity Application
- Nonrefundable administrative fee of \$150.00
- Photocopy of the curriculum for the completed EMS course
- Evidence of successful course completion and out-of-country certification or licensure

Once the above items are received, we will make a determination of your eligibility for Texas EMS personnel certification or paramedic licensure. Please note; however, once our review of your out-of-country credentials are completed, you may be notified, in writing, of any identified deficiencies. You may be required, at such time, to complete a Department approved refresher course and/or provide additional information/documentation.

When you are approved for Texas EMS personnel certification or licensure, you will be notified in writing, and provided with evidence of review of your eligibility for Texas certification or paramedic licensure. You will then be required to complete the following:

- Skills proficiency verification (SPV), administered by a Texas certified skills examiner, for the level in which you are deemed eligible
- Present evidence of review and SPV at a Texas testing site; sit for the written certification/licensure examination

If you successfully complete all of these components, including passing the written examination, your Texas EMS personnel certification or paramedic license will commence on issuance date and will be valid for four years, provided you meet continuing education (CE) requirements.

Should you have additional questions, and/or require further assistance, please contact EMS Standards staff at (512) 834-6700.

EMS Standards
Bureau of Emergency Management

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ATTENTION OUT-OF-COUNTRY RECIPROCITY CANDIDATES

To facilitate the evaluation of qualifications of out-of-country candidates for reciprocity, please read the following information from the State EMS Training Coordinator and include with your out-of-country reciprocity application and fee.

All candidates SHOULD forward:

! material which describes the clock hour requirements for classroom, clinical, and field experience and which includes either:

- the exit competencies for the program attended, or
- the instructional objectives for the program, or
- a course schedule or other detailed synopsis of the course content.

Note: If the documentation submitted indicates that a content area or skill required for Texas certification or licensure is optional or may be completed through post graduate continuing education, then the candidate should provide appropriate evidence of completion.

Candidates applying for Paramedic Licensure SHOULD forward:

! in addition to the above listed material, attach a copy of your college diploma or transcript. You must have it translated and evaluated (course-by-course) by a foreign credentials evaluation service. Licensure rule requires you have completed at least 60 hours of college credit from a regionally accredited college or university which includes the Academic Core Curricula.

Candidates should NOT forward:

! complete copies of course syllabi. These documents frequently are very lengthy and contain extra information not needed to evaluate the training for equivalency.

! copies of tables of contents from the textbooks used. These do not verify that all information included in the text actually was covered in the course.

! certificates of course completion without accompanying information which allows us to determine the course content. For example, a certificate of completion in "Advanced Airway Management" without an accompanying documentation listing the competencies acquired is of little use.

Should you have any questions regarding the material referenced above you may contact the EMS Education Program by telephone at (806) 743-3218 or by electronic mail at: alhnbc@ttuhsc.edu.